

IT Initiative Supplement

February 25, 2010

I. Project Description

Project Title: TPL Data Matching System

Brief Description of the Project Title: This system will have connections to health insurers' data systems that will provide better data on third party resources owned by clients whose medical costs were originally paid by Medicaid.

Statewide Priority: 1

Agency Priority: 1

Estimated Completion Date: FY2015

IT Project Biennium: FY2012-13, FY2014-15

Request Number:

Version:

Agency Number: 6901

Agency Name Department of Public Health and Human Services

Program Number:

Program Name: Quality Assurance Division

A. Type of Project (check all that apply)

Enhancement

Replacement

New X

O&M

B. Type of System (check all that apply)

Mid-Tier X

Mainframe

GIS

Web

Network

Desktop

II. Narrative

C. Executive Summary

Project Purpose and Objectives:

The State of Montana Department of Public Health and Human Services (Department or DPHHS) uses demographic, employment, medical, and many other types of data to ensure Montanans are receiving appropriate services from the State. To create a holistic view of the Department's program participants, DPHHS plans to implement a data matching application. This application would link person-level information from various sources. The Quality Assurance Division is working with the Technology Services Division's Project Management Bureau to determine the best alternative for a data matching application.

The Department wants to maximize its ability to pay for needed services by ensuring it does not pay when another party is liable for health service payment. Medicaid is the payer of last resort. Legally, all other third party resources must pay medical claims before Medicaid pays for an individual's healthcare. Third party resources include private health insurance, Medicare, employment-related health insurance, workers' compensation, and long term care insurance. The Department has the legal right to use third party insurance information, but does not currently have a method to electronically match insurance information with client information. This application will provide that means.

Technical Implementation Approach:

DPHHS is moving away from monolithic and outdated legacy systems and toward its vision of web-based, people-friendly, and interoperable systems meeting and exceeding program needs. Enterprise architecture is the centerpiece of this shift from the present to the future. The architecture will allow the separate, standalone systems to communicate using exposed, shared services through a common architecture. System users will be able to use the three systems seamlessly, and not have to enter the same information multiple times.

The architecture created for the three CHIMES systems, SNAP, TANF and Medicaid, will reshape the way DPHHS serves Montanans and does business going into the future. The CHIMES enterprise architecture will become the DPHHS enterprise architecture as systems are replaced.

Project Schedule and Milestones:

N/A

D. Business and IT Problems Addressed

The following list of data exchange processes is specific to third party insurance identification and matching needs. The application will eventually be used in a broader context and will need to exchange information with other internal and external systems/applications, including, but not limited to, Montana Automated Child Welfare Information System (MACWIS), CHIMES-TANF, CHIMES-SNAP, FullCourt (probate court information), Vital Statistics, Department of Revenue, System for the Enforcement and Recovery of Child Support (SEARCHS), Department of Labor and Industry, and Child and Adult Protective Services System (CAPS). Medicare Supplement and Medicare Advantage plans may also be matched by this application in the future.

1. Insurance Carriers

The system must verify third party insurance information with the State's major insurance carriers. Montana's primary carriers are Blue Cross/Blue Shield, New West, Allegiance, and EBMS. Other insurance carriers will also be included. The Department will be securing agreements with these carriers.

2. CHIMES-Medicaid

The Medicaid eligibility system, CHIMES-Medicaid, must contain accurate and up-to-date third party insurance information. CHIMES-Medicaid is a web-based system, which will be enhanced to utilize the Department's enterprise architecture. The TPL data match application should exchange information with CHIMES-Medicaid over the enterprise service bus, using shared web services. Before CHIMES-Medicaid uses the enterprise architecture, the data match application may need to exchange information with CHIMES-Medicaid using a traditional interface.

3. Health Insurance Premium Payment System (HIPPS)

The Health Insurance Premium Payment System (HIPPS) needs to match insurance information with Medicaid recipients in this system. The Department is replacing HIPPS. This information exchange will be needed once the new system and the enterprise architecture are implemented.

E Alternative(s)

Alternatives Considered: N/A

Rationale for Selection of Particular Alternative: N/A

E. Narrative Detail

The Department will need to analyze the responses to the RFI and conduct a gap analysis comparing the responses to the requirements and to each other. Following this, the Department will determine its next step to actualizing the application through an alternatives analysis. The gap analysis will provide some information for this step, but additional research will also be necessary.

III. Costs

G. Estimated Cost of Project:

Estimated Cost of Project	FY2010	FY2011	FY2012	FY2013	FY2014	FY2015	Total
1. Personal Services - IT Staff							0
2. Personal Services - Non IT Staff							0
3. Contracted Services			1,000,000	100,000	100,000	100,000	1,300,000
4. ITSD Services							0
5. Hardware							0
6. Software							0
7. Telecommunications							0
8. Maintenance							0
9. Project Management							0
10. IV & V							0
11. Contingency							0
12. Training							0
13. Other							0
Total Estimated Costs	0	0	1,000,000	100,000	100,000	100,000	1,300,000

Total Funding:

IV. Funding

H. Funding

Total Funding	FY2010	FY2011	FY2012	FY2013	FY2014	FY2015	Total
Fund							
1. 01100			100,000	10,000	10,000	10,000	130,000
2. 03580			900,000	90,000	90,000	90,000	1,170,000
3.							0
4.							0
5.							0
6.							0
Total Estimated Costs	0	0	1,000,000	100,000	100,000	100,000	1,300,000

Cash/Bonded:

Bill Number:

V. Cost upon Completion

1. Operating Costs upon Completion

This is an ongoing effort and does not have a completion date.

FTE:

Personal Services Costs:

Operating Costs:

Maintenance Expenses:

Total Estimated Costs:

2. Funding Recap

This is an ongoing effort and does not have a completion date.

Fund Type:

Amount:

Total Funding:

V. Risk Assessment

A. Current IT Infrastructure Risks

1. Current application 10+ years old? _N/A_
Date of last major upgrade?
2. Current application is based on old technology? _N/A_
If yes, what is the current hardware platform, operating system, and programming languages used to support the application?
3. Is the agency not capable of maintaining the current application with internal technical staff? _N/A_
If yes, who supports the application today?
4. Other IT infrastructure risks? _N/A_
If yes, provide further detail.

B. Current Business Risks

1. What are the risks to the state if the project is not adopted?

If a Data Match System is not incorporated person-level information from various sources would not be able to be linked and utilized by the CHIMES systems and any other future system replacements which could use such technology and information.

2. Does the current application meet current business requirements? _N/A_
 If “no”, what specific business functions does the application lack?

C. Project Risk Assessment

1. Describe any major obstacles to successful implementation and discuss how those obstacles will be mitigated.

Table H Risk Assessment

Description	Severity (H/M/L)	Probability of Occurrence (%)	Estimated Cost	Mitigation Strategy